



NSW
Therapeutic
Advisory
Group Inc.

Advancing
quality use
of medicines
in NSW

Group Discussion: Management of patient's own cannabinoid products

Date: August 2018

Question:

NSW TAG received an enquiry from a member about how hospitals are managing the circumstance when a patient (non-hospice) is admitted to hospital with their own cannabinoid products and they are unable to be immediately returned home with a carer.

NSW TAG and TAGNet members were asked to provide the following information:

1. How are hospitals managing this 'stock' particularly as it may not be easily measurable and/or may be 'illegal'. Where/how is it stored/documented/destroyed?

Responses:

• The Pharmaceutical Services Unit (PSU):

- Provided a link to the [Information Bulletin](#) which provides guidance on authorisation, prescribing and dispensing of cannabinoid containing products at NSW public health facilities following amendment to the NSW Poisons and Therapeutic Goods Regulation 2008 on 1 August 2016.
 - *'Where a pharmacist labelled unregistered cannabinoid containing product is brought into the hospital as patient's own stock, having been commenced prior to hospital admission, hospitals must check that use of the product is appropriately authorised (where required). Contact should be with the pharmacy or prescriber named on the dispensing label in the first instance. Prescribing whilst an inpatient is subject to the individual patient use approval process'.*
 - *'Appropriately authorised and prescribed cannabinoid containing products (other than a Schedule 4 cannabidiol product) must be procured, stored, recorded and administered as a Schedule 8 medication. The Secretary, NSW Health may, on a written application, exempt a cannabinoid containing product that requires storage in a refrigerator from the Schedule 8 medication storage requirements'.*
 - *'Some patients may be using illegal cannabis preparations e.g. for symptom relief or in the desire to modify the course of a disease. Possession of these prohibited drugs / plants is illegal under the NSW Drug Misuse and Trafficking Act, even where patients are registered with the NSW Government's Medical Cannabis Compassionate Use Scheme. See <http://www.nsw.gov.au/tics>. As such, NSW Health staff cannot store or administer these preparations in the hospital or administer when providing care in the home setting. The preparations cannot be legally prescribed. A history must be taken and disclosure of use encouraged. The risks of using these preparations of unknown composition and concentration of cannabinoids and other potentially dangerous substances, and the risk of drug interactions (some unpredictable or undocumented), must be discussed. In accordance with good practice it is recommended to document substance use in the patient's clinical record. This should include information about advice given, any changes to therapy, and the decision of the patient. Notwithstanding the above, patients should be made aware that continued use of any illegal cannabis preparation remains unlawful. If a patient brings an illegal cannabis preparation onto hospital premises the patient should be requested to have a carer remove the preparation from the hospital premises, or as otherwise provided under a local protocol'.*
- Also noted is the relevance of the recently released NSW Health [Safety Notice 008/18](#) – Return of patients' own medications.

- **Calvary Mater Newcastle (CMN)**

More and more patients are either wanting to bring their own cannabis products into hospital with them or are wanting to access them through our pharmacy.

To date, unless the patient is a part of a clinical trial, then we advise the patient:

1. that they are not able to bring their cannabis product/products into hospital with them even for self-administration*
2. the CMN hospital pharmacy is not able to assist with the access of cannabis products.

*At this point in time the CMN doctors have made the decision not to support the use of cannabis products regardless of whether they were lawfully or unlawfully obtained. On those occasions where a patient has presented with their cannabis product and the cannabis product is not able to be immediately removed by a family member/carer then this product is treated like other illicit substances – it is secured in a tamper evident bag, marked with the patient's name. This bag is then locked in the ward's accountable drug safe until it can be returned to the patient/patient's family member/carer.

In an attempt to clarify the current position re cannabis products I prepared the following information for our clinicians in May 2018.

You will note that at the time I also recommended that we develop a local policy, this is still under consideration.

1. *Access.*

- i. Patients access cannabis-based products lawfully through the Authorised prescriber/ Authorised patient/Authorised pharmacy Scheme. (Note: this does not apply to cannabidiol only products, these are Schedule 4 drugs and as such do not require a NSW Health Authority to prescribe.

This scheme requires the prescriber to be authorised by NSW Health to prescribe a cannabis-based product for an individual patient. This patient then has their lawfully prescribed cannabis-based product dispensed lawfully through a nominated pharmacy.

[Application for Authority to Prescribe and Supply a Cannabis Product for Human Therapeutic Use](#)

- ii. Patients access Cannabinoid/cannabis products through the NSW Government's Medicinal Cannabis Compassionate Use Scheme.

The Scheme does not supply cannabis or cannabis products or endorse the use of cannabis products not lawfully prescribed. There are legal pathways for a medical practitioner to prescribe a cannabis medicine for their patient, if the practitioner believes it is an appropriate treatment option. Cannabinoid /cannabis products accessed this way are considered as non-lawfully prescribed cannabinoid containing products (NLPC).

[Medicinal Cannabis Compassionate Use Scheme](#)

- iii. Patients access Cannabinoid /cannabis products unlawfully.

2. *Implications for NSW Public Hospital In-patients.*

- i. When a patient presents to a NSW Public Hospital with a lawfully prescribed cannabis product, this product may be lawfully prescribed by a hospital doctor, if the treating team deems treatment with this product is appropriate and following consent of the Public Hospital's Drug and Therapeutics Committee.

A lawfully prescribed and lawfully dispensed cannabis product may be stored within the NSW Public Hospital. It is treated in the same manner as all other Schedule 8 products. A lawfully prescribed and lawfully dispensed cannabis product may be administered by hospital staff to the patient during their in-patient stay using the product supplied by the patient.

- ii. When a patient presents to a NSW Public Hospital with a non - lawfully prescribed (NLP) cannabis product this product may not be prescribed by a hospital doctor. This holds for patients either registered under the NSW Government's Medicinal Cannabis Compassionate Use Scheme or not registered under the NSW Government's Medicinal Cannabis Compassionate Use Scheme.

A non- lawfully prescribed cannabis product may not be stored within the NSW Public Hospital. A non- lawfully prescribed cannabis product may not be administered to the patient during their in-patient stay by hospital staff even if using the product supplied by the patient.

If the treating doctor deems that the patient will benefit from continuing to take a cannabis product then either the patient or the patient's carer is responsible for:

- a. supplying the cannabis product
- b. bringing in the required dose of the cannabis product immediately prior to its administration
- c. administering or ingesting the cannabis product – hospital staff cannot assist with the administration of NLP cannabis product
- d. complying with their legal responsibilities under the NSW Government's Medicinal Cannabis Compassionate Use Scheme and the local policies of the hospital
- e. ensuring that the NLP cannabis product is consumed either as a spray, vapour or is ingested. (Note: Cannabis cannot be smoked within either the hospital or the hospital grounds)
- f. accepting all liability associated with the access and use of NLP cannabis products both during admission to the hospital and following discharge from the hospital.

Given the high level of emotions associated with the use of cannabis products, I feel that the CMN hospital would benefit from introducing a policy to help clinicians understanding of the current situation. Such a policy would need to be updated to ensure that it continued to reflect and comply with current legislative requirements.

- **St Vincent's:** In general, management of cannabinoid products (legal or illegal) has been very challenging. Some of these products are not accessed via the SAS/authorised prescriber route and are further complicated with syringes/devices that may be unreliable re dosing and proper documentation in register (if they were to be considered for inpatient use) is difficult. When the products are suspected of being illegal, the police often become involved. Nurses on occasion have to lock it up (treating it like any other Schedule 8).

Depending on the indication and appropriateness it may be possible for a hospital-based authorized prescriber to facilitate a legal supply. Hospitals may need to consider need for a back-up authorised prescriber when the usual authorised prescriber is away to ensure continuity of care. It is very difficult with the register– measurement of the volume when 3

the patient brings in a part bottle is difficult without risking loss of drug, there is no overage like registered S8 product and the locked fridge is logistically challenging.

We often consult PSU with each new challenge, to which they also have to consider carefully.

- **Blue Mountains District AM Hospitals:** We only deal with legal products. Illegal products would be surrendered to the police or, if we were unsure, they would be returned home with the patient's carer. We treat these legal products as a Schedule 8. We retain the legal product if there is no alternative in the short to medium term.
The Pharmacy is usually notified if the patient brings in a cannabinoid. Measurement of liquid products at ward level is problematic and generally inaccurate. Additionally the staff may be only able to estimate the original volume. Disposal of the product would be the same as for Schedule 8.
- **Bowral (SWSLHD):** We haven't had to deal with yet but if we were to encounter it we would likely document as patient's own S8 in register. Anything where I was worried about legality I would check with PSU for direction. If deemed S8 and requiring destruction follow normal procedure.
- **Port Macquarie and Kempsey:** We haven't yet but if we were to encounter it I anticipate that that I would ask the nursing staff to treat it as an unknown complementary and alternative medicine (for the non-SAS products) and keep it secure with the patient belongings as we don't know that it is an illegal substance if we don't know exactly what it is.

Sites that are yet to experience the scenario or do not have policy in place have expressed their interest in the outcome of the final email discussion including interest from a QLD site.

Responses received as at 6th August 2018

Please note that all information and policies are only current at the time the response is sent and individual hospitals should be contacted to ascertain current policies and practices. The responses received are only representative of the hospitals participating in the discussion at the time and do not necessarily indicate a complete picture of current practices. Information sharing occurs on the understanding that due acknowledgement will be given to the original source and that the information will not be quoted or used out of the context of the discussion. Permission should be sought from the original source before any policy, protocol or guideline is used or applied in another setting.